

United States Bankruptcy Court

Eastern District Of New York**In re**

Fraleg Group LLC

Case No. 1-19-42557**Debtor**Chapter 11**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 8,500.00Prior to the filing of this statement I have received \$ -0.00-Balance Due \$8,500.00

2. The source of the compensation paid to me was:

 Debtor Other (specify)

3. The source of compensation to be paid to me is:

 Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor' s financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

LEGFRAS GROUP LLC
BALANCE SHEET
AS OF
APRIL 29, 2019

ASSETS:

Cash or Cash Equivalents	\$ -0.00-
Real Property:	
1135 Clay Avenue, Bronx, NY	\$900,000.00
37 Kenilwoth Place, Brooklyn, NY	\$1,200,000.00
249 St. Marks Avenue, Freeport, NY	\$550,000.00
Total Real Property	\$2,650,000.00
TOTAL ASSETS	\$2,650,000.00

LIABILITIES:

Mortgage Loan	\$1,570,000.00
TOTAL LIABILITIES	\$1,570,000.00
<u>OWNERS EQUITY:</u>	
TOTAL LIABILITIES + OWNERS EQUITY	\$2,650,000.00

Fill in this information to identify the case:

Debtor name Legfras Group LLC

United States Bankruptcy Court for the: Eastern District of New York
(State)

Case number (If known): 1-19-42557 Chapter 11

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.2	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.3	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.4	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.5	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Debtor Legfras Group LLC _____ Case number (if known) 1-19-42557 _____
Name _____

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____ _____	State the term remaining _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease _____ _____ _____

Fill in this information to identify the case:

Debtor name Legfras Group LLC
 United States Bankruptcy Court for the: Eastern District of New York
 (State)
 Case number (If known): 1-19-42557

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

	Column 1: Codebtor	Column 2: Creditor	
	Name	Mailing address	Name
2.1	<u>Moke Peace 2 Corp.</u>	<u>249 St. Marks Avenue</u> Street <u>Freeport</u> <u>New York</u> <u>11520</u> City State ZIP Code	<u>Kordun Construction Corp.</u> <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	<u>Construction</u> <u>Modern Design Inc.</u>	<u>195 Saint James Place</u> Street <u>Brooklyn</u> <u>New York</u> <u>11238</u> City State ZIP Code	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3		<u>Street</u> <u>City</u> <u>State</u> <u>ZIP Code</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4		<u>Street</u> <u>City</u> <u>State</u> <u>ZIP Code</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5		<u>Street</u> <u>City</u> <u>State</u> <u>ZIP Code</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6		<u>Street</u> <u>City</u> <u>State</u> <u>ZIP Code</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor

Legfras Group LLC

Name

Case number (if known) 1-19-42557

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2._____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

X

In Re: Legfras Group LLC

Chapter 11

Case No. 1-19-42557

X

DEBTORS AFFIDAVIT PURSUANT TO L.B.R 1007-4

STATE OF NEW YORK)
COUNTY OF KINGS) SS.:

RONALD FRASER, being duly sworn, deposes and says:

1. Legfras Group LLC., (hereinafter known as "Legfras"), is a small business within the meaning of Bankruptcy code § 101(51D)
2. The nature of the Legfras' business is that of real property developers wherein we purchase real property, rehabilitate the property, and then resell the property as individual condominium units or hold the units as rental units if necessary. The circumstances leading to us filing a Bankruptcy Chapter 11 petition is as a result of a loans in the approximate amount of \$1,580,000.00.
3. The name and address of each of the holders of the 201 largest general unsecured claims, excluding insiders are:

NONE

4. The name and address of the five largest secured creditors are:

(A)	PAME Associates LLC 5 Wallenberg Circle, Monsey New York 10952 Tel.: c/o Ted Moises, Esq.: (845) 548-2740 Amount of Claim: \$880,000.00 Property/Collateral securing claim: <u>Description</u>	<u>Est. Value of Collateral</u>	<u>Claim/Lien Disputed</u>
	37 Kenilworth Place Brooklyn, New York	\$490,000.00	No
	249 St. Marks Avenue Freeport, NY 11520	\$390,000.00	No
(B)	Kordum Construction Corp		

69-41 76th Street
Middle Village, New York 11379

Amount of Claim: \$690,000.00

Property/Collateral securing claim:

<u>Description</u>	<u>Est. Value of Collateral</u>	<u>Claim/Lien Disputed</u>
1135 Clay Avenue Bronx, New York 10456	\$490,000.00	No

5. There are no classes of shares of stock, debentures, or other securities of the Debtor that are publicly held..
6. A summary of the Assets and Liabilities of the Debtor are as follows:

Assets:

Real Property:

1135 Clay Avenue, Bronx, New York 10456	\$900,000.00
37 Kenilworth Place, Brooklyn, New York 11210	\$1,200,000.00
249 St. Marks Avenue, Freeport, New York 11520	\$550,000.00

Total Assets: **\$2,650,000.00**

Liabilities:

Mortgage Loans	\$1,570,000.00
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Total Liabilities: **\$1,570,000.00**

7. A list of Debtor's property in the possession of a custodian, public officer, mortgagee, pledgee, assignee of rents, or secured creditor, or agent for any such entity:

NONE

8. Location of Debtors significant Assets are: Kings County and Nassau County, New York. The location of the Debtors books are Kings County, New York. The Debtor does not own any assets outside the territorial limits of the United States.
9. There is a foreclosure court action against the Debtor in the Supreme Court of the State of New York, Nassau County. A sale date was set for April 30, 2019 and the Debtor filed a bankruptcy petition in order to stay the sale.
10. There is a present foreclosure action against the Debtor in the Nassau County, Supreme Court. The Plaintiff in the action is PAME Associates LLC. The current status is a judgement of foreclosure has been granted to the Plaintiff, and a sale of the defendants assets 249 St. Marks Avenue, Freeport, NY 11520 was scheduled for April 30, 2019 at 11:00 am.

defendants assets 249 St. Marks Avenue, Freeport, NY 11520 was scheduled for April 30, 2019 at 11:00 am.

11. The Debtors senior management are:

<u>Management</u>	<u>Title</u>	<u>Experience</u>
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Andy O. Alege, V. President: Mr. Alege has extensive experience in acquiring, rehabilitating, and designing residential residences

Ronald Fraser, President: Mr. Fraser has extensive experience acquiring, rehabilitating, and designing residential residences.

12. The Debtor does not have a weekly payroll, nor does the Debtor have a proposed payroll for the 30-day period following the filing of this petition. Nor does the Debtor have employees at the current time.

13. The Debtor will not be paying for any services for the next 30 days following the filing of this Chapter 11 Petition to its officers and/or directors.

14. Legfras has not prepared any statements of cash receipts and disbursements, net cash gain or loss, obligations and receivables in any form. Legfras has not received any income due to the present vacancies of the subject properties listed above.

21st
Dated: May 14, 2019
New York, New York



5/14/19
Ronald Fraser (Affiant)

Sworn to before me on
this 21st day of May 2019



NOTARY PUBLIC

RICHARD ROACH
NOTARY PUBLIC, State of New York
No. 01RO6000257
Qualified in New York County
Certificate Filed in Kings County
Commission Expires March 4, 2022

Fill in this information to identify the case:

Debtor name Legras Group LLC
 United States Bankruptcy Court for the: Eastern District of New York
 (State)
 Case number (If known): 1-19-42557

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest		
2. Cash on hand	\$ _____		
3. Checking, savings, money market, or financial brokerage accounts (Identify all)			
Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. _____	_____	_____	\$ _____
3.2. _____	_____	_____	\$ _____
4. Other cash equivalents (Identify all)			
4.1. _____	\$ _____		
4.2. _____	\$ _____		
5. Total of Part 1	\$ _____		

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.
 Yes. Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit	Current value of debtor's interest
7.1. _____	\$ _____
7.2. _____	\$ _____

Debtor Legfra Group LLC _____ Case number (if known) 1-19-42557 _____
 Name _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____
 8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

No. Go to Part 4.

Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

11a. 90 days old or less: _____ - face amount _____ = → \$ _____
 doubtful or uncollectible accounts _____

11b. Over 90 days old: _____ - face amount _____ = → \$ _____
 doubtful or uncollectible accounts _____

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ _____

Part 4: Investments

13. Does the debtor own any investments?

No. Go to Part 5.

Yes. Fill in the information below.

Valuation method used for current value

Current value of debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____ \$ _____
 14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity: % of ownership:

15.1. _____ % _____ \$ _____
 15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____
 16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Debtor Legfras Group LLC _____ Case number (if known) 1-19-42557 _____
 Name _____

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.
 Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. Raw materials

_____ MM / DD / YYYY \$ _____ \$ _____

20. Work in progress

_____ MM / DD / YYYY \$ _____ \$ _____

21. Finished goods, including goods held for resale

_____ MM / DD / YYYY \$ _____ \$ _____

22. Other inventory or supplies

_____ MM / DD / YYYY \$ _____ \$ _____

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$ _____

24. Is any of the property listed in Part 5 perishable?

No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No
 Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No
 Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops—either planted or harvested

_____ \$ _____ \$ _____

29. Farm animals Examples: Livestock, poultry, farm-raised fish

_____ \$ _____ \$ _____

30. Farm machinery and equipment (Other than titled motor vehicles)

_____ \$ _____ \$ _____

31. Farm and fishing supplies, chemicals, and feed

_____ \$ _____ \$ _____

32. Other farming and fishing-related property not already listed in Part 6

_____ \$ _____ \$ _____

Debtor Legfras Group LLC
NameCase number (if known) 1-19-42557**33. Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. Is the debtor a member of an agricultural cooperative? No Yes. Is any of the debtor's property stored at the cooperative? No Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value \$ _____ Valuation method _____ Current value \$ _____**36. Is a depreciation schedule available for any of the property listed in Part 6?** No Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?** No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. Office furniture

\$ _____ \$ _____

40. Office fixtures

\$ _____ \$ _____

41. Office equipment, including all computer equipment and communication systems equipment and software

\$ _____ \$ _____

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

42.1 _____ \$ _____ \$ _____

42.2 _____ \$ _____ \$ _____

42.3 _____ \$ _____ \$ _____

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ _____

44. Is a depreciation schedule available for any of the property listed in Part 7? No Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?** No Yes

Debtor Legfras Group LLC _____ Case number (if known) 1-19-42557 _____
 Name _____

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.

Yes. Fill in the information below.

General description <small>Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)</small>	Net book value of debtor's interest <small>(Where available)</small>	Valuation method used for current value	Current value of debtor's interest
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47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

_____	\$ _____	_____	\$ _____
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51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ _____

52. Is a depreciation schedule available for any of the property listed in Part 8?

No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No
 Yes

Debtor

Legfrag Group LLC

Name

Case number (if known) 1-19-42557

Part 9: Real property

54. Does the debtor own or lease any real property?

 No. Go to Part 10. Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 1135 Clay Avenue, Bronx, NY	Fee	\$ 900,000.00	Appraisal	\$ 900,000.00
55.2 37 Kenilworth Place, Brooklyn	Fee	\$ 1,200,000.00	Appraisal	\$ 1,200,000.00
55.3 249 St. Marks Avenue, Freeport, NY	Fee	\$ 550,000.00	Appraisal	\$ 550,000.00
55.4 (Multi Family Real Property)		\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 2,650,000.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

 No
 Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

 No
 Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

 No. Go to Part 11.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____
66. Total of Part 10.			\$ _____

Add lines 60 through 65. Copy the total to line 89.

Debtor

Legfras Group LLC
Name

Case number (if known) 1-19-42557

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ -0.00-	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ -0.00-	
82. Accounts receivable. Copy line 12, Part 3.	\$ -0.00-	
83. Investments. Copy line 17, Part 4.	\$ -0.00-	
84. Inventory. Copy line 23, Part 5.	\$ -0.00-	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ -0.00-	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ -0.00-	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ -0.00	
88. Real property. Copy line 56, Part 9.	→	\$2,650,000.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ -0.00-	
90. All other assets. Copy line 78, Part 11.	+ \$ -0.00-	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ -0.00-	+ 91b. \$ 2,650,000.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ 2,650,000.00

Fill in this information to identify the case:

Debtor name Legfras Group LLC
 United States Bankruptcy Court for the: Eastern District of New York
 (State)
 Case number (If known): 1-19-42557

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 Creditor's name

PAME Associates LLC

Describe debtor's property that is subject to a lien

37 Kenilworth Place, Brooklyn, NY	\$ 490,000.00	\$ 900,000.00
(A multi-family building)		

Column A
Amount of claim
 Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Creditor's mailing address

5 Wallenberg Circle

Monsey, New York 10952

Creditor's email address, if known

Date debt was incurred 04/2015

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor, and its relative priority.Describe the lien Mortgage

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

2.2 Creditor's name

PAME Associates LLC

Describe debtor's property that is subject to a lien

249 St. Marks Avenue	\$ 390,000.00	\$ 550,000.00
Freeport, New York 11520		

Creditor's mailing address

5 Wallenberg Circle

Monsey, New York 10952

Creditor's email address, if known

Date debt was incurred 04/2015

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

 No Yes. Have you already specified the relative priority? No. Specify each creditor, including this creditor, and its relative priority. Yes. The relative priority of creditors is specified on lines _____Describe the lien Mortgage

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ 1,570,000.00

Debtor

Legfra Group LLC

Name

Case number (if known) 1-19-42557

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
 * Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2. Creditor's name	Describe debtor's property that is subject to a lien		
<u>Kordum Construction Corp</u>	<u>1135 Clay Avenue, Bronx, New York</u>	<u>\$ 690,000.00</u>	<u>\$ 900,000.00</u>
Creditor's mailing address	<u>Multi family Apartment</u>		
<u>69-41 76th Street</u>			
<u>Middle Village, New York 11379</u>			
Creditor's email address, if known	Describe the lien		
_____	_____		
Date debt was incurred	Is the creditor an insider or related party?		
<u>07/2015</u>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	_____
Last 4 digits of account number	_____		
Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is:		
<input checked="" type="checkbox"/> No	Check all that apply.		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	_____		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	_____		
2. Creditor's name	Describe debtor's property that is subject to a lien		
_____	<u>\$</u> _____	<u>\$</u> _____	_____
Creditor's mailing address	_____		
_____	_____		
Creditor's email address, if known	Describe the lien		
_____	_____		
Date debt was incurred	Is the creditor an insider or related party?		
<u>07/2015</u>	<input type="checkbox"/> No	<input type="checkbox"/> Yes	_____
Last 4 digits of account number	_____		
Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is:		
<input type="checkbox"/> No	Check all that apply.		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	_____		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	_____		

Debtor

Legfras Group LLC
Name

Case number (*if known*) 1-19-42557

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Fill in this information to identify the case:

Debtor name Legras Group LLC
 United States Bankruptcy Court for the: Eastern District of New York
 (State)
 Case number (If known): 1-19-42557

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>MM / DD / YYYY</u>	to <u>Filing date</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ _____
For prior year:	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ _____
For the year before that:	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ _____

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>MM / DD / YYYY</u>	to <u>Filing date</u>		\$ _____
For prior year:	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>		\$ _____
For the year before that:	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>		\$ _____

Debtor

Legfras Group LLC

Case number (*if known*) 1-19-42557

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1.			
Creditor's name		\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street			

City	State	ZIP Code	
3.2.			
Creditor's name		\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street			

City	State	ZIP Code	

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1.			
Insider's name		\$	
Street			
City	State	ZIP Code	
Relationship to debtor			

4.2.			
Insider's name		\$	
Street			
City	State	ZIP Code	
Relationship to debtor			

Debtor Legfras Group LLC
Name

Case number (if known) 1-19-42557

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
5.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
	Last 4 digits of account number: XXXX- _____		

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

 None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. _____ Case number _____	_____ Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ Name _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. _____ Case number _____	_____ Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ Name _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor _____ Case number (if known) _____
 Name _____

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Custodian's name and address	Description of the property	Value
Custodian's name _____ Street _____ City _____ State _____ ZIP Code _____	Case title _____	\$ _____
	Case number _____	Court name and address _____ Name _____ Street _____ City _____ State _____ ZIP Code _____
	Date of order or assignment _____	

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
	Recipient's relationship to debtor _____		
9.2. Recipient's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
	Recipient's relationship to debtor _____		

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
_____	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	_____	\$ _____
_____		_____	\$ _____
_____		_____	\$ _____

Debtor _____ Case number (if known) _____
 Name _____

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
--	---	-------	-----------------------

11.1. _____ \$ _____

Address _____
 Street _____
 City _____ State _____ ZIP Code _____

Email or website address _____

Who made the payment, if not debtor?

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
--	---	-------	-----------------------

11.2. _____ \$ _____

Address _____
 Street _____
 City _____ State _____ ZIP Code _____

Email or website address _____

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

_____ \$ _____

Trustee _____

Debtor Legfras Group LLC Name _____ Case number (if known) 1-19-42557

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
<p>Address</p> <p>Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Relationship to debtor _____</p>			
13.2. _____	_____	_____	\$ _____
<p>Address</p> <p>Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Relationship to debtor _____</p>			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
14.1. _____ Street _____	From _____ To _____
City _____ State _____ ZIP Code _____	
14.2. _____ Street _____	From _____ To _____
City _____ State _____ ZIP Code _____	

Debtor

Legfras Group LLC
Name

Case number (if known) 1-19-42557

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.1.

Facility name

Street

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.**How are records kept?**

City

State

ZIP Code

Check all that apply:

- Electronically
- Paper

Facility name and address**Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.2.

Facility name

Street

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.**How are records kept?**

City

State

ZIP Code

Check all that apply:

- Electronically
- Paper

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?** No. Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

- No
- Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit? No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

- No. Go to Part 10.
- Yes. Fill in below:

Name of plan**Employer identification number of the plan**

EIN: _____ - _____ - _____ - _____ - _____

Has the plan been terminated?

- No
- Yes

Debtor

Legfras Group LLC
Name

Case number (if known) 1-19-42557

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. Name Street City State ZIP Code	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2. Name Street City State ZIP Code	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name Street City State ZIP Code	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Address _____			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name Street City State ZIP Code	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Address _____			

Debtor Legfras Group LLC Case number (if known) 1-19-42557

Name

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	_____
City _____ State _____ ZIP Code _____			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____	_____	<input type="checkbox"/> Pending
_____	Street _____	_____	<input type="checkbox"/> On appeal
City _____ State _____ ZIP Code _____			<input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Debtor

Legfras Group LLC

Case number (if known)

1-19-42557

Name

24. Has the debtor notified any governmental unit of any release of hazardous material?

 No Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
_____	_____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____	_____	_____

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

 None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ Dates business existed _____
From _____ To _____		
Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.2. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ Dates business existed _____
From _____ To _____		
Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.3. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ Dates business existed _____
From _____ To _____		

Debtor Legfras Group LLC Case number (if known) 1-19-42557

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address		Dates of service	
26a.1.		From _____	To _____
Name _____			
Street _____			
City _____		State _____	ZIP Code _____

Name and address		Dates of service	
26a.2.		From _____	To _____
Name _____			
Street _____			
City _____		State _____	ZIP Code _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address		Dates of service	
26b.1.		From _____	To _____
Name _____			
Street _____			
City _____		State _____	ZIP Code _____

Name and address		Dates of service	
26b.2.		From _____	To _____
Name _____			
Street _____			
City _____		State _____	ZIP Code _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address		If any books of account and records are unavailable, explain why	
26c.1.		_____	
Name _____		_____	
Street _____		_____	
City _____		State _____	ZIP Code _____

Debtor Legfras Group LLC Case number (if known) 1-19-42557

Name and address**If any books of account and records are unavailable, explain why**

26c.2.

Name _____

Street _____

City _____

State _____

ZIP Code _____

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

Name and address

26d.1.

Name _____

Street _____

City _____

State _____

ZIP Code _____

Name and address

26d.2.

Name _____

Street _____

City _____

State _____

ZIP Code _____

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory**Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

\$ _____

Name and address of the person who has possession of inventory records

27.1.

Name _____

Street _____

City _____

State _____

ZIP Code _____

Debtor Legfras Group LLC Case number (if known) 1-19-42557

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
_____	_____	\$ _____

Name and address of the person who has possession of inventory records

27.2. _____
 Name _____
 Street _____

 City _____ State _____ ZIP Code _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Ronald Fraser	249 St. Marks Avenue Freeport, NY 11520	President	50%
Andy Alege	195 St. James Place Brooklyn, NY	Vice President	50%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			From _____ To _____
			From _____ To _____
			From _____ To _____
			From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Name _____ Street _____ _____	_____	_____	_____
City _____ State _____ ZIP Code _____	_____	_____	_____
Relationship to debtor _____	_____	_____	_____

Debtor Legfras Group LLC Name Case number (if known) 1-19-42557

Name and address of recipient

30.2 Name _____
 Street _____
 City _____ State _____ ZIP Code _____

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No

Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
_____	EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No

Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
_____	EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/21/2019
 MM / DD / YYYY



Signature of individual signing on behalf of the debtor

Printed name Ronald Fraser

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

No
 Yes

Fill in this information to identify the case:

Debtor name Legfras Group LLC
 United States Bankruptcy Court for the: Eastern District of New York
 (State)
 Case number (If known): 1-19-42557

Check if this is an amended filing

Official Form 206Sum**Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**

Copy line 88 from *Schedule A/B*..... \$2,650,000.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*..... \$ -0.00

1c. Total of all property:

Copy line 92 from *Schedule A/B*..... \$2,650,000.00

Part 2: Summary of Liabilities**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 1,570,000.00

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 0.00

3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... + \$ 0.00

4. Total liabilities.....

Lines 2 + 3a + 3b

0.00

\$ 1,570,000.00